

Brian W. Paff, DO Orthopaedic Surgeon Upper Extremity Specialist 370 N 120th Ave Holland, MI 49424 P 616.396.5855

LABRAL REPAIR PROTOCOL

Phase 1: Maximal Protective Phase (Weeks 0-6)

Goals

- Protect anatomy of the repair
- Decrease pain and inflammation
- Promote dynamic stability
- Retard muscle atrophy

Precautions:

- No active abduction, external rotation, or extension
- No isolated biceps lifting with weight
- Sling may be discontinued as pain permits

Exercises:

- Pendulums
- Self-PROM/AAROM in Flexion to tolerance
- Self-PROM/AAROM in External Rotation to Neutral
- Scapular, Shoulder, and Rotator Cuff Isometrics
- Elbow, Wrist, Hand AROM
- Modalities as needed

Phase 2: Intermediate Phase - Moderate Protection Phase (weeks 6-10)

Goals:

- Decrease pain and inflammation
- Restore full PROM and AROM
- Gradual increase in strength

Precautions:

- Patients are not allowed to lift weight above the shoulder
- Patients should not lift >5 pounds

Early Intermediate Phase (Weeks 5-7)

- Gradually progress P/AROM
 - Flexion, elevation in plane of scapula to tolerance
 - Abduction to 145°
 - External rotation to 45-50° at 45° abduction
 - Internal rotation to 55-60° at 45° abduction
 - Extension to tolerance
- Initiate gentle rhythmic stabilization exercises
- Initiate proprioceptive exercises
- initiate Rotator Cuff strengthening with arm in neutral
- Strengthening exercises for the hand, wrist, elbow, and scapular musculature
- Modalities as needed



Brian W. Paff, DO Orthopaedic Surgeon Upper Extremity Specialist 370 N 120th Ave Holland, MI 49424 P 616.396.5855

LABRAL REPAIR PROTOCOL (page two)

Phase 2: Intermediate Phase - Moderate Protection Phase (weeks 6-10) (cont'd) Late Intermediate Phase (Weeks 8-14)

- Gradually progress P/AROM
 - Flexion, elevation in plane of scapula, and abduction to 180°
 - External rotation to 90-95° at 90° abduction
 - Internal rotation to 70-75° at 90° abduction
 - Extensions to tolerance
 - Continue distal upper extremity and scapular strengthening
- Continue rhythmic stabilization
- Initiate shoulder strengthening exercises with weights/theraband progressing as tolerated
- Initiate "Thrower's Ten" program
- Modalities as needed

Criteria for Progression to Phase 3

- Full non-painful ROM
- Good stability
- Muscular strength, 4/5 or better
- No pain or tenderness

Phase 3: Minimal Protection Phase (Weeks 14-20)

Goals:

- Maintain full, non-painful AROM
- Improve shoulder strength, power, and endurance
- Improve neuromuscular control
- Gradual return to functional activities

Early Minimal Protection Phase (Weeks 14-16)

- Continue all stretching exercises (capsular strengthening)
- Maintain thrower's motion (especially external rotation)
- Continue rotator cuff, shoulder, and periscapular strengthening exercises
- Resisted PNF exercises
- Endurance training
- Initiate light plyometric exercises
- Restricted sports activities (light swimming, half golf swings)

Late Minimal Protection Phase (Weeks 16-20)

- Continue all strengthening exercises
- Continue all stretching and flexibility exercises
- Continue "Thrower's Ten" program
- Continue plyometric program
- Initiate interval sports program (e.g. throwing)

Criteria for Progression to Phase 4

- Full non-painful ROM
- Satisfactory static stability
- Muscular strength 75-80% of contralateral side
- No pain or tenderness



Brian W. Paff, DO Orthopaedic Surgeon Upper Extremity Specialist 370 N 120th Ave Holland, MI 49424 P 616.396.5855

LABRAL REPAIR PROTOCOL (page three)

Phase 4: Advanced Strengthening Phase (Weeks 20-26)

Goals

- Enhance shoulder strength, power, and endurance
- Maintained shoulder stability
- Progress functional activity
- Continue flexibility exercises
- Continue isometric strengthening exercises
- PNF manual resistance patterns
- Plyometric strengthening
- Progress interval sports programs

Phase 5: Return to Activity Phase (Months 6-9)

Goals

- Gradually progress sports activities to unrestrictive participation
- Continue strengthening and stretching program